PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10698440

(Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			3				٠ [RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			3 minus 20=		*			X\$ 9=		OR	X\$18=	
_	DEPENDENT C		minus 3 =				ſ	X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+145≐		OR	+290=	
* If the difference in column 1 is less than zero, enter "0"						olumn 2	Ł	TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II									•		OTHER	THAN
		(Column 1)		(Column 2) (Colu				SMALL ENTITY			SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	*	RATE	ADDI- TIONAL FEE
	Total	. 3	Minus	** &	20	= —		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus	***	3		Ī	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
>							L Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		a	Γ	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	~	•	T	X43=		OR	X86=	
	TIMOT FRESE	ITATION OF MIC	LIPLE DEP	ENDENT	CLAIM		T	+145=		OR	+290=	
								TOTAL DIT. FEE		OR ,	TOTAL ODIT, FEE	
		(Column 1)		(Colum	n 2)	(Column 3)	• •		_			
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	Г	X43=		.	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash	X105		OR	A00	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 20, enter "20." ADDITIONAL THE PROPERTY OF TH										OR	+290=	
H	the "Highest Nun the "Highest Nur	nber Pr viously Pai nber Previously Pai ber Previously Paid	d For IN THIS d For IN THIS	SPACE IS I	less than	20, enter "20."		TOTAL DIT. FEE			TOTAL DDIT. FEEL mm 1.	
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